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## BIB DATA SHEET

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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

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**\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

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| Foreign Priority claimed       | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|--------------------------------|---|--|------------------|-----------------|--------------|--------------------|
| 35 USC 119(a-d) conditions met | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |                  |                 |              |                    |
| Verified and                   | /SUSANNAH LEE<br>CHUNG/<br>_____<br>Acknowledged                    | sc<br>Initials                               | NETHERLANDS      | 0               | 74           | 1                  |
| Examiner's Signature           |   |  |                  |                 |              |                    |

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**TITLE**

1H-1,2,4-triazole-3-carboxamide derivatives having cannabinoid-CB1 receptor agonistic, partial agonistic, inverse agonistic or antagonistic activity

|                             |   |   |
|-----------------------------|---|---|
| FILING FEE RECEIVED<br>1160 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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